40 Watson-Williams—Colledge—Gill-Carey—Layton

December 1.—Flabbiness of the cheek felt to be less, and epiphora has nearly disappeared, though no visible change. Now very definite improvement in tone of face, with some capacity for voluntary movement at the corner of mouth and in forehead. In repose asymmetry of face hardly noticeable; no change in electrical reactions.

Hypoglossal-facial Anastomosis for Facial Palsy following Mastoid Operations.

By LIONEL COLLEDGE, F.R.C.S.

CAPTAIN B., aged 32. Mastoid operation in India in 1921, followed by facial palsy fourteen days later. Further mastoid operation in India, and subsequently the wound was re-opened and grafted in London two years after first operation. No recovery of facial muscles, except for slight voluntary movement of the orbicularis palpebrarum.

June, 1923.—Hypoglossal-facial anastomosis with secondary descendens hypoglossal anastomosis. There is electrical recovery to faradism of all facial muscles.

Descendens Noni Facial Anastomosis for Bell's Palsy.

By LIONEL COLLEDGE, F.R.C.S.

MISS A. H., aged 29. Referred by Dr. A. Feiling on account of Bell's palsy, showing no improvement after four years. Reaction of degeneration in all facial muscles of left side. Descendens noni facial anastomosis; descendens found to be appreciably smaller than facial. Peripheral end of descendens implanted into the side of hypoglossal. A year later electrical recovery of all facial muscles and muscles supplied by descendens. No paralysis of tongue.

Spinal Accessory Facial Anastomosis for Facial Palsy during Acute Destruction of Labyrinth.

By C. GILL-CAREY, F.R.C.S.Ed.

MRS. A., aged 29. Acute mastoid, 1924. Nerve paralysed before operation, no recovery. Radical operation, January 1925, did not heal. Labyrinth fell out as a sequestrum, immediate healing. Spinal accessory divided below nerve to sternomastoid and joined end-to-end to facial (Mr. C. H. Fagge), October, 1925.

Facial Palsy Five Years After Injury.

By T. B. LAYTON, D.S.O., M.S.

JAMES A., now aged 16. April, 1922, complete facial palsy following attempt at radical mastoid. Injury to nerve was outside skull. Radical mastoid performed later. Some recovery of power.